

1897

Gloucestershire County Council.

25<sup>TH</sup> OCTOBER, 1897.

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ANNUAL REPORT

OF

The Medical Officers of Health  
(Reports) Committee

TOGETHER WITH

ABSTRACTS FROM THE VARIOUS M.O.H. REPORTS,  
WITH STATISTICS, &c.,

FOR 1896.

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## *REPORT OF THE MEDICAL OFFICERS OF HEALTH (REPORTS) COMMITTEE of the GLOUCESTERSHIRE COUNTY COUNCIL for 1896.*

This Report, which is now presented to the County Council, deals with the health of the County between January 1st and December 31st, 1896.

It was the hope of the Committee that this Report might have been presented earlier in the year, and a letter was addressed to each of the Medical Officers of Health asking them to favour the Council with their Reports so that they might be considered in April. It was not, however, until after the July meeting that the whole of the Reports came to hand, consequently it is not until October that the Report of this Committee is in the hands of the County Council.

The vital statistics of the County collated from Tables A and B of the Local Government Board returns, furnished by each of the Medical Officers of Health, is herewith appended.

The Report of the Medical Officer of Health for the City of Gloucester was handed to the Committee, but inasmuch as the City forms no part of the Administrative County of Gloucester, the vital statistics relating thereto are not included in the County health rates. The figures which have a special interest this year are shown in a separate table.

## Births.

The number of births registered in the Administrative County in 1896 was 11,046. The birth-rate was therefore 23·59 per 1,000. In 1895 it was 26·69. In the whole of England and Wales the birth-rate for the same period was 29·7.

To the exodus of the able-bodied population from the Rural Districts, consequent upon agricultural depression, and the substitution of machinery for manual labour, may be ascribed this reduction in the birth-rate of Gloucestershire. The districts where wages range higher—the Forest of Dean, Tewkesbury, Gloucester, and the outlying portions of Bristol—show no diminution. Cheltenham, on account of its position as an educational centre, and a resort for those who have passed the meridian of life, shows the unusually low birth-rate of 21·2 per 1,000. Stroud is remarkable in having a birth-rate of only 18·8.

## Deaths.

The number of deaths registered in the County was 6,057, giving a death-rate of 14·19 per 1,000, compared with 15·47 in 1895. The rate for the whole of England and Wales was 17·1 per 1,000. So Gloucestershire may be considered as particularly favoured.

Infant Mortality.<sup>3</sup>

Under 1 year per 1,000 born, Gloucestershire 105·4, compared with 123·6 in 1895, and the whole of England and Wales 148. There is some discrepancy in these figures. The death-rate calculated by the Medical Officer of Health of the 41 districts gives an average of 105·4, yet the deaths, 1329, under 1 year, multiplied by 1,000 and divided by



11,046, the number of registered births gives an infantile death-rate of 111·2. This may be accounted for by some Reports including the deaths in work-houses and institutions as in, but not belonging to, that district, and others not. This rate compares very favourably with that of the previous year.

It will be found that in 1895 throughout the County a large proportion of the deaths of children of very tender years was ascribed to diarrhœa. It is believed that infantile diarrhœa depends to a very great extent upon a high ground temperature. When the thermometer, plunged 4 feet into the soil, shows a temperature of 56°, diarrhœa invariably appears, and as the temperature falls it invariably diminishes.

It is evident, therefore, that increased care as regards flushing drains and the removal of refuse from the neighbourhood of dwellings ought to be the special care of Sanitary Authorities in all seasons where the rise of the ground temperature is likely to favour the development of the special miasma which appears to be the cause of the majority of cases of infantile diarrhœa.

It is satisfactory to find that the whole of the Districts, with the exception of Dursley, Tewkesbury Rural, and West Dean, have adopted the Notification of Infectious Diseases Acts. 2940 cases of infectious disease were brought to the knowledge of the Medical Officers of Health. Of these 326 died. The zymotic death rate of the county is ·41. This compares very favourably with that of the whole of

England and Wales, 2·18. But as considerable variation exists in the practice of Medical Officers of Health in computing this rate by the inclusion or not of Measles, Whooping Cough, and Erysipelas, it is not altogether a reliable basis of comparison.

#### Scarlet Fever.

Scarlet Fever was exceedingly prevalent in some districts. No less than 1524 cases were notified. The disease was generally of a mild character, and only resulted in 43 deaths. These deaths all occurred in those districts where no Isolation Hospital is provided. It is an example of the advantage of hospital treatment that in the Cheltenham Delancey Hospital the death rate for 20 years, with total admissions of 1580 cases, stands at 1·83 per cent., and for 1895 and 1896 at ·0 per cent. Mr. E. Cocks Johnson, Medical Superintendent, reports:—"It is with much satisfaction that I am able to report that it is now two years since we have had a death in the Hospital out of a total of 263 cases, comprising Scarlet Fever, Small-pox (23 cases) Enteric, and Diphtheria." This is evidence of skilful treatment and nursing in large and airy wards, and of strict after-care, which it is impossible to secure in the homes of any but the wealthier classes.

#### Small-pox

169 cases were notified, resulting in 19 deaths, or 11·8 per cent. In the Gloucester Rural District of 81 cases 13 died, a case death rate of 16 per cent.

The value of a special and well-appointed hospital is again shown by the Delancey Hospital, where out of 23 cases, some very severe ones, not a single death occurred.

The Epidemic of Small-pox at Gloucester which brought Gloucestershire into such unenviable prominence last year, resulted in 1995 persons being attacked. It is fully reported upon by Dr. Campbell, Medical Officer of Health for the City, and by Dr. Bond, Medical Officer of Health for the Rural District, in their printed Reports to their several authorities.

Typhus.

It is satisfactory to note that no case of this disease was notified.

Typhoid.

72 cases notified, 26 of them resulted fatally—a rate of 36 per cent.

Contamination of water supply, the eating of unwholesome shell-fish, and actual contagion are the chief causes of this complaint. The remedy is so much in the control of Sanitary Authorities that the eradication of typhoid will be achieved *pari passu* with the advance of Sanitation, and the appreciation of the fact that typhoid is a filth disease.

“Of course, drainage, with all its traps, sinks, pipes, etc. is a very complicated subject, and a thorough knowledge about it we leave to the Sanitary Authorities. But men and women must understand that smelling sinks, cess pools, and drains are poisonous to the inhabitants of the houses where they occur; and that not only are they the actual vehicles for conveying the germs of disease, but they cause a lowered vitality, and therefore a greater readiness to take disease. There is



no doubt that there are a great many diseases caused entirely by imperfect drainage, and the increasing appreciation of this fact is doing much to dispel that doctrine which Charles Kingsley tried so hard to resist, and which Tennyson, in the poem of 'The Village Wife' describes in a nutshell, thus :—

I thowt 'twear the will o' the Lord,  
But Miss Annie, she säaid it wus dräains."

#### Diphtheria

Was prevalent in certain localities; 361 cases were notified; 62 deaths resulted. The success of prompt treatment by anti-toxic serum of Diphtheria has been demonstrated by Dr. R. C. Leonard, of Almondsbury, for in 22 cases of diphtheria treated with anti-toxin only 2 deaths occurred, whilst in 16 cases in which it was not applied 5 deaths resulted. The disease seems to linger round the Thornbury District, 53 cases.

In Gloucester Rural District and Cheltenham there were an unusual number of cases, and of a virulent type. In St. George's and Stapleton a considerable number of cases were also notified. It seems generally admitted that a great predisposing cause in the generation of this disease is damp, and neglect of sanitary precautions. Although it cannot be proved definitely that these conditions can produce infection *de novo*, there is no doubt but that children living in such surroundings are more liable to attack when infection is rife, and that the symptoms are often more violent.

Dr. Bond, Medical Officer of Health for Thornbury, ascribes its prevalence last year (1) To the



influence of moisture on a heated soil—so much of which in the neighbourhood of towns is unavoidably polluted by sewage and other similar matters; or (2) To the effect of heavy rainfall in stirring up the contents of the sewers; or (3) To the influence of the same condition in driving the ground air out of the soil, and with it the germs of the disease.

Membranous Croup.

31 cases of this complaint were notified, 21 of them ended fatally—a death-rate of 67·7 per cent.

Membranous croup is now always classed with and considered to be diphtheria. It is extremely fatal to very young children. Bacteriological examination alone can differentiate between cases of true diphtheria and non-infectious croup and spasmodic laryngitis.

Continued and Relapsing  
Fever.

Are absent from our returns.

Puerperal Fever.

34 cases notified, resulting in 12 deaths.

Cholera.

No case.

Erysipelas.

303 cases, 10 deaths.

Measles.

One of the most fatal of all diseases, and one which is treated contemptuously as a simple child's disorder. Children are most liable to attack in the 3rd, 4th, or 5th year, but the disease is most fatal in the 2nd year. Ordinary, measles is a comparatively harmless malady in families comfortably off. In the outbreak at Cheltenham in 1895-6, of 1400 cases, in all conditions of life, the 49 deaths occurred, without exception, in the houses of the poorer classes.

The main reason for this difference is that well-to-do people understand the importance of keeping the child's body warm, and poor people do not.

Much has been said about making measles one of the notifiable diseases, both for and against it. The chief objection seems to be on the score of the expense. A fee of 2s. 6d. per case to the medical man, as laid down in the Act, seems unreasonable in cases where the disease runs its course through a family.

The Medical profession would not be likely to raise objection were the notification fee in this disease reduced to 1s. per case, or to 2s. 6d., the one fee to include all succeeding cases in any one house. But in order to adopt such a scale an amendment of the Act is required. It is not to be supposed that the object of notification would be to remove the cases to hospitals, but to keep the Medical Officer of Health informed of the state of his district, in order that he might, if necessary, take measures to close the schools, or send round printed instructions to parents as to the treatment and after-care of the sufferers.

Dr. Bond, Medical Officer of Health for Lydney, strongly recommends the employment by the Sanitary Authority of a well trained nurse to visit where the disease is prevalent, for the purpose of teaching the mothers how to avoid the disastrous consequences of catching cold after an attack of measles.

The Local Government Board have ruled that the provision of nurses comes within the term

“Medical assistance” which Sanitary Authorities may provide for the poorer persons in their districts under the Public Health Act, 1875.

Notification of Measles.

General attention was drawn to this subject by a circular from the Local Government Board by Dr. T. Thompson, and notification stands at the head of his recommendations. 91 Sanitary Authorities in England, including Newcastle-on-Tyne, Blackpool, Carlisle, Colchester, Coventry, Croydon, Pontefract, Preston, and Reading, have made the notification of measles compulsory.

A *via media* suggested also by Dr. Thorne-Thorne, of the Local Government Board, may be found in a system of partial notification being instituted by the Schoolmasters and School Attendance Officers, giving information to the Medical Officer of Health of cases of absence from school from measles, etc. Furthermore, Schoolmasters may properly be asked to take note, especially when an epidemic threatens or is present, of symptoms occurring in any of their scholars that may indicate the commencement of disease febrile in nature, and to exclude them from the schools until assurance can be had that they may attend without danger to the other children.

Whooping Cough.

124 fatal cases occurred, 113 of which were in children under 5 years of age.

Diarrhoea

Was less general than usual during the year; only 109 deaths resulted.

Dr. Priestly, Medical Officer of Health for Lambeth, presented to the Sanitary Congress at



Leeds a paper on the subject, from which the following is an extract:—

“The disease is practically endemic, showing  
 “itself only during the months of July, August,  
 “and September, when the 4-feet earth thermometer  
 “registers 56° F and over, and disappearing when  
 “that point again is reached as the temperature  
 “falls. What the changes are that take place in the  
 “subsoil I cannot definitely state, but it is probable  
 “that they are of a putrifiactive and bacterial nature,  
 “giving rise to the subsequent and consequent  
 “development of the special diarrhœal poison. The  
 “disease attacks all—rich and poor, strong and  
 “weakly—but proves fatal only in the very young  
 “and very old.”

It must not be taken that the poisonous condition of the soil is generated at a depth of 4 feet. It is rather that when the heat of the season has raised the temperature of the ground at a depth of 4 feet to 56°, the filth-sodden ground above ferments, and produces the specific germ of the disease. It has been remarked that this is most common on gravel or sandy soil, and that it is rare on the clay. Cleanliness, frequent flushing of drains, and plenty of sunlight and air are the best preventatives against this disease, which it is frequently in the power of Sanitary Authorities to very considerably diminish.

Phthisis.

317 deaths are registered against this disease.

Isolation Hospitals.

The suggestion in last year's report that Districts might with advantage group themselves



for the purpose of constituting Hospital Districts under the Isolation Hospitals Act, 1893, has not met with any response from Sanitary Authorities. Difficulties have arisen in its adoption by other counties from the fact that the requirements of the Local Government Board are very strict as regards height, cubic contents, and the floor space of wards, and that any buildings to be erected with borrowed money must be of substantial materials, and not of wood and iron; also that any Hospital for the reception of Small-pox must be at a distance of a quarter of a mile from any other house or hospital.

It is understood that in view of the difficulty which has generally been experienced in getting these conditions fulfilled in any but large towns and wealthy communities, the Local Government Board will consent to favourably consider plans submitted which satisfy as nearly as is practicable their conditions, consideration being given to local circumstances.

The Medical Officers of Health are generally in this County favourable to the establishment of Hospitals for the Isolation of Scarlet Fever, Typhoid, and Diphtheria. If Sanitary Authorities would consider the advisability of joining in the erection of Hospitals under Section 131 of the Public Health Act, 1875, they might do a service to the health of the district, without the necessity of constituting another authority in their midst or seeking the intervention of the County Council in the matter.

Sec. 131.

“Any Local Authority may provide for the use of the inhabitants of their district, hospitals or

temporary places for the reception of the sick, and for this purpose they may

“Themselves build such hospitals or places of reception, or contract for the use of any such hospital or part of a hospital, a place of reception, or

“Enter into any agreement with any person having the management of any hospital for the reception of the sick inhabitants of their district, on payment of such annual or other sum as may be agreed on.

“Two or more Local Authorities may combine in providing a common hospital.”

#### Sewage Disposal Works.

The success which has attended the establishment of the Sewage Disposal Works at Exeter, where it has been in operation for over a year on an extensive scale, has attracted the attention of all Municipal and County Engineers. A process which without the use of chemicals, by the action of natural agents, is practically self-working, which produces no sludge, and requires no attention, has much to commend it in the eyes of Authorities who have hitherto found that their great difficulty has been the effective disposal of their sewage without polluting their streams or causing a nuisance in the vicinity of their works.

#### Complaint.

Attention is again drawn by Dr. Partridge, Medical Officer of Health, to the insanitary condition of Painswick. The drains are bad. The water is bad. No steps have been taken to remove the refuse which is allowed to accumulate in close proximity to

the houses. Such continued neglect of sanitation by a Local Authority should be brought to the notice of the Local Government Board. The Local Authority should insist that the scheme for the provision of a proper water supply, so long *in embryo*, should be forthwith carried out by the Parish, or they should do it themselves.

#### Vaccination.

The Vaccination question is still with us. So far from Gloucestershire having profited by the object lesson of the Small-pox epidemic last year, it seems as though the bulk of the people are as strongly opposed to the operation of the existing law as they were before.

This inclines one to the conclusion that it must be due to some reasonable objection on the part of parents to the manner and methods in which Vaccination is presented, which renders them unwilling to afford to their children that protection which they were glad to avail themselves of when the epidemic raged in Gloucester.

The recent report of the Local Government Board, after exhaustive investigation in Germany and other countries into the systems adopted there, commends very highly the general use of glycerinated calf-lymph as an absolute protection from the introduction of any human disease by Vaccination.

The extension of the Vaccination age beyond that of lactation and dentition might go far to remove the objections of parents.



The examination of children and their Vaccination as a condition precedent to their attending elementary schools would serve to prevent the recurrence of the calamity which ensued on the introduction of Small-pox infection into the Widden Street School at Gloucester.

Dr. Bond presented a thoughtful and practical paper on this subject before the late Sanitary Congress at Leeds. His conclusions and recommendations cannot fail to be of interest to all Sanitary Authorities; and his practical experience of the objections to the existing system renders his work of special value now that the Government propose to introduce Legislation based upon the Report of the Vaccination Commission.

The Committee are pleased to remark that so far as can be gathered from their own Reports the Medical Officers of Health and the Sanitary Inspectors appear to be doing their work efficiently, and that the various Sanitary Authorities, with some exceptions, seem desirous to carry into effect the recommendations made them by their professional advisers for the control of infectious disease, and the improvement of the sanitary condition of their Districts.

An Abstract of the Report of each Medical Officer of Health is furnished, and statistical tables of the health of the County.

J. C. GRIFFITH,

*Chairman of the Committee.*

September 23rd, 1897.



ABSTRACTS OF THE REPORTS  
OF THE  
MEDICAL OFFICERS OF HEALTH  
OF THE 41 DISTRICTS  
OF GLOUCESTERSHIRE.  
1896.



*The Population of each District and the Birth and Death Rates  
will be found in the Table at end of Report.*

WEST DEAN  
RURAL.

M.O.H.—DR. MALCOLM POIGNAND.

Isolation Hospital—None.

Allowing for Whooping Cough, which is more or less inevitable, and 9 cases of Small-pox, which, considering how severely it affected the Gloucester District which adjoins this, the health of the district has been very good. Diphtheria has not only been milder, but far less prevalent than it used to be.

COLEFORD.  
URBAN.

M.O.H.—DR. P. BUCHANAN.

Isolation Hospital—None.

Singularly free from infectious disease. Only 5 cases notified during the year. Drainage and scavenging scheme suggested by Medical Officer of Health approved, and proceeded with to the great advantage of the town. The Local Government Board Model Bye-laws have been adopted. The water supply is good and ample.

LYDNEY.  
RURAL.

M.O.H.—DR. BOND.

Isolation Hospital — Small-pox, none. General diseases, yes.

Measles and Whooping Cough were prevalent. There is only one form of action which in his opinion would be of any material use in helping to lessen the severity of these two diseases, and that is the employment by the Sanitary Authority of a well-

trained nurse to visit every house in any district in which either of them might be prevalent for the purpose of teaching the mothers how to treat the children so as to avoid prejudicial results.

Steps are being taken to provide a water supply for Lydney, and a sewerage scheme is under consideration. The increasing importance of the town as a manufacturing centre, the increase of new houses, the multiplication of drains, and the general pollution of the ground by pig-keeping and other contaminations, render the provision of these a matter of urgent necessity.

EAST DEAN.  
RURAL.

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M.O.H.—DR. BOND.

Isolation Hospital—Small-pox and General Diseases.

The Zymotic mortality exhibits a very material increase, due to the prevalence of Measles, Scarlatina, and Whooping Cough. Scarlatina has been confined almost entirely to the Forest District. 12 cases of Small-pox were notified. A Hospital was erected in a picturesque part of the Forest, near Gunn's Mills, of iron and wood.

AWRE.  
URBAN.

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M.O.H.—DR. BOND.

Isolation Hospital—None.

Not a single case of infectious disease occurred within the year. An outbreak of Anthrax was reported, but not in a human subject. The Council declined to join with Newnham, Westbury, and East Dean in taking over the Small-pox Hospital or the Soudley Hospital, although that building is close to the border of their district. It is difficult



to see how such a course of action as this can be defended, except on grounds which, if generally acted upon, would render social as well as sanitary progress of all kinds impracticable.

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NEWNHAM.  
URBAN.

M.O.H.—DR. BOND.

Isolation Hospital—None.

The District has been free from any serious prevalence of preventable disease. During the past year Mr. Woods, a resident of long standing, has at his own expense provided a constant supply of excellent water, which has proved a great boon to the town.

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WESTBURY-ON-  
SEVERN.  
URBAN.

M.O.H.—DR. BOND.

Isolation Hospital—None.

Three cases of Small-pox were notified. There being no Hospital these cases were treated at home. All recovered. The District is purely rural, and has generally been very free from infectious disease.

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NEWENT.  
RURAL.

M.O.H.—DR. W. N. MARSHALL.

Isolation Hospital for Small-pox. For General Diseases—None.

An exceedingly low death-rate for the district. Only 47 of the total, 121, died during youthful and middle age, and one-fourth of the deaths took place in persons over 75. Three cases of Small-pox occurred, but were promptly isolated, and all did well. The Guardians have decided to enforce the Vaccination Act.

TEWKESBURY.  
URBAN.

M.O.H.—Dr. ALLARD.

Isolation Hospital for Small-pox and General Diseases.

The Notification Act came into force this year. The health of the Borough is satisfactory, and a marked decrease in the infantile mortality, from 250 to 117 per 1,000 births, is shown.

TEWKESBURY.  
RURAL.

M.O.H.—Dr. A. F. TURNER.

The Notification Act is not in force. Dr. Turner comments upon the great disadvantage it is that he has thus no opportunity of dealing promptly with cases of Infectious Disease as they occur.

Plans have been prepared for the erection of an Isolation Hospital. A supply of good water has been obtained for the Hamlet of The Barrow from the mains of the Cheltenham Corporation.

PEBWORTH.  
RURAL.

M.O.H.—Dr. HARRISON GILPIN.

Isolation Hospital—None.

Only 3 cases of Infectious Disease notified, but these are not returned in the Local Government Board Table. Whooping Cough prevalent at Pebworth. Useful work done in remedying insanitary condition of houses in rural villages.

WINCHCOMB.  
RURAL.

M.O.H.—Dr. COX.

Isolation Hospital—None.

Thirty-one cases of Scarlet Fever were notified. Urgent necessity exists for an Isolation Hospital. The Local Government Board having decided that the Infectious Ward at the Workhouse is not avail-

able except for paupers, accommodation of a superior class where patients can be received on payment is badly needed.

The Gretton and Greet water scheme progresses slowly. Guiting Power has no proper supply. Lectures on Domestic Hygiene are doing good. It is hoped that they may be continued. Ventilation should be a special subject of instruction.

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NORTHLEACH.  
RURAL.

M.O.H.—Dr. RYAN MACMAHON.

Isolation Hospital—None.

The Infāntile mortality is 126·1 ; higher than it should be, but less than last year, when it was 137·6. 43 cases of infectious disease were notified. The Medical Officer of Health regrets the absence of any Isolation Hospital. The condition of the district is considered to be fairly satisfactory.

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STOW-ON-THE-WOLD  
RURAL.

M.O.H.—Dr. DENING.

Isolation Hospital—None.

In March Influenza prevailed in Oddington, Adlestrop, and Lower Swell, but did not last long. In June Whooping Cough was epidemic in Bledington, followed by Measles. Every precaution was taken and provision made in case Small-pox should appear, but fortunately no case occurred.

Water supply generally good. In the village of Upper Swell there has been no death for three years ; whilst this makes the fourth year in succession that there has been no death in the village of Daylesford.

STOW-ON-THE-WOLD  
URBAN.

M.O.H.—Dr. DENING.

Isolation Hospital—None.

During the Autumn Whooping Cough was epidemic. A severe form of Measles prevailed also, followed by complications. 300 cases occurred and 6 deaths. One-half of the deaths under 5 years were due to Measles and Whooping Cough. No case of Small-pox. Hospital tents were provided in anticipation. The water supply is ample and excellent in quality.

BOURTON-ON-THE-  
WATER.  
RURAL.

M.O.H.—Dr. CORSER.

Isolation Hospital—None.

Present phenomenally low death-rate is ascribed to mild winter and healthy season. 57 cases of Scarlet Fever and 6 of Diphtheria, but no deaths. Infant mortality only half of what it was last year.

Progress has been made in connecting the house drains with the new sewerage system. Dr. Corser reports that his condemnation of the existing water supply was fully borne out by the Report of the County Analyst, who at the instance of a Special Committee examined samples taken from wells of their own selection, and one from the brook.

The necessity for a sufficient supply of pure water for drinking and flushing purposes has been impressed upon the Sanitary Authority by the County Council and the Local Government Board, and it is satisfactory to note that the matter has been placed in the hands of a competent engineer and is likely shortly to be carried to a successful issue.



CAMPDEN.  
RURAL.

M.O.H.—DR. G. FINDLAY.

### Isolation Hospital for Small-pox and General Diseases.

There has been no epidemic of Infectious Disease during the year. The Cottage Hospital at Moreton-in-Marsh seems to be doing excellent work in checking Infectious Disease. The District Council pays all expenses connected with the treatment of cases. Disinfectants are also supplied free of charge, and copies of printed instructions are left at all infected houses. The Council have purchased two Hospital Tents. Arrangements have been made for the erection of these Tents at proper distances from the principal villages in the district in case of necessity. The Committee has the Moreton Water Supply well in hand. A Local Government Board enquiry was held into the general sanitary condition of Moreton, in November, but at the date of this Report no reply had yet been received.

MARSTON SICCA.  
RURAL.

M.O.H.—DR. A. THOMPSON.

### Isolation Hospital for all Diseases.

The Joint Infectious Hospital has proved of the greatest advantage to the district. Much attention has been given to the Water Supply question at Marston Sicca. An eminent engineer was consulted, and experimental borings were made, but hitherto without success.

FARINGDON  
RURAL.

M.O.H.—DR. F. E. STREETER.

### Isolation Hospital—None.

Only partly in Gloucestershire. The provision of a permanent Isolation Hospital has been shelved.

Two collapsible Hospital huts were purchased, and are stored away ready for use. The Thames Conservancy officers are active in preventing pollution of the tributaries of the Upper Thames. Many farms which supply the London Dairy Companies are under inspection, and stringent rules are enforced as to the sanitation of the premises and the purity of the water supplied to the cattle.

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CIRENCESTER.  
URBAN

M.O.H.—Dr. BOND.

Isolation Hospital for Small-pox and for General Diseases. (Jointly with Rural District.)

In spite of the prevalence of an unusual amount of Scarlet Fever and Diphtheria, the death-rate is lower than usual. This may be ascribed to the absence of Measles and Whooping Cough—the main source of infant mortality. The Medical Officer of Health is glad again to report upon the thoroughly efficient way in which the sanitary administration of this picturesque and enterprising town is conducted. The increase in the house accommodation, which is being effected both on the Ashcroft Estate and at Watermoor; the public-spirited outlay made by Earl Bathurst and the Council in carrying out the improvement in Castle Street; the acceptance by the Council of the swimming baths; and the contemplated purchase of the Waterworks, are all illustrations of the energetic spirit with which the citizens of Cirencester regard their duties both to themselves and to their successors.

CIRENCESTER.  
RURAL.

M.O.H.—Dr. BOND.

Isolation Hospital for Small-pox and other Diseases.

An exceptionally low mortality, being the lowest on record for 24 years.

Several cases of Diphtheria having occurred, the Council resolved to supply Antitoxin gratuitously to the District Medical Officers of the Union for the patients under their charge. 68 cases of Scarlet Fever were notified, 33 of whom were treated in the Isolation Hospital. The two cottages at South Cerney are retained for the reception of Small-pox cases.

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TETBURY.  
URBAN.

M.O.H.—Dr. BOND.

Isolation Hospital—None.

The Notification Act is now adopted. The Council arranged to take two cottages in case Small-pox should break out, but fortunately the town escaped. The water supply has been improved by increased pumping power. The sewage works have continued in a satisfactory condition.

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TETBURY.  
RURAL.

M.O.H.—Dr. BOND.

Isolation Hospital—None.

A death-rate of 11·6 per 1000, and a practical freedom from zymotic mortality indicate a condition of things on which it would be difficult to improve. An excellent water scheme has been formulated by Mr. Erskine Pollock, Q.C., for the supply of water to the village of Avening. A reservoir at the spring capable of holding 35,000 gallons is connected by



pipes to the Cross and thence to such points on the roads diverging as will give a supply within reasonable distance to nearly all the inhabitants of the village, standards with taps being supplied at suitable spots. The cost of the scheme is about £350.

NAILSWORTH.  
URBAN.

M.O.H.—DR. PARTRIDGE.

Isolation Hospital—Small Pox. General Diseases—  
None.

The drainage is still connected with the stream, and even offal is often visible in the water. The water supply is satisfactory. Zymotic disease has not been prevalent. Two cases of Small-pox occurred, which were treated in the Isolation Hospital.

STROUD.  
URBAN.

M.O.H.—DR. PARTRIDGE.

Isolation Hospital—Small-pox, General Diseases—  
None.

Details difficulties experienced in the isolation of Small-pox cases. Statistics show an unusually low birth-rate for a manufacturing population. A death-rate of 11·9 is also exceptional for an urban population. The water supply is good and ample; the sewage works efficient. This has been an exceptional year, no epidemic of any sort of disease, a low infantile death-rate, and a very good sanitary condition of the town.

STROUD.  
RURAL.

M.O.H.—DR. PARTRIDGE.

Isolation Hospital for Small-pox; General Diseases—  
None.

Eighty-two cases of zymotic disease were notified, resulting in 11 deaths. Small-pox, 9 cases, 2 deaths.



The drainage of several villages in the district is most defective and conducive to disease, Ebley especially. Cainscross is alluded to as having no system of drainage. Houses where Typhoid broke out were in two cases new ones. The builder "did not know where the drains went to." This points to the advisability of the Council adopting building bye-laws.

Painswick is again alluded to as being in an insanitary condition. Dr. Partridge writes: "It is in the same state as formerly reported. I do not hear of any steps having been taken by the Painswick Council *re* scavenging; and I am informed that the owner of the water supply, which is supposed to be the only available supply, will not negotiate with the Sanitary Authority."

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M.O.H.—DR. WELLER.

FRAMPTON-ON-  
SEVERN  
SUB-DISTRICT.  
RURAL.

Isolation Hospital—Small-pox; for General Diseases—  
None.

The dry season caused a great scarcity of water, but fortunately no illness was caused by it. 2 cases of Small-pox occurred, but prompt isolation prevented any spread of the disease. Sanitation has been well carried out in the district and several defects remedied.

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M.O.H.—DR. G. B. WATERS.

HARESFIELD  
SUB-DISTRICT.  
RURAL.

Isolation Hospital—Small-pox; for General Diseases—  
None.

3 cases of Small-pox occurred; 1 death. All were isolated in their own homes, and nurses supplied from Gloucester. Measles was epidemic in the district, but no fatal case was recorded.

Dr. Watters' remarks upon the necessity for greater care in the cleanliness of dairies, and the practice of storing meat in close proximity to milk. This he considers most objectionable. Fresh milk being very readily absorbent is rendered liable to injurious decomposition by contamination from such a source. The existence of several streams and ditches polluted by sewage has been pointed out and schemes suggested for their abatement. The district may be considered to be in a fairly satisfactory condition.

CHELTHENHAM.  
URBAN.

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M.O.H.—DR. J. H. GARRETT.

Isolation Hospital—Small-pox and General Diseases.

The sanitary condition of this important town receives the earnest attention of the Corporation, and no expenditure of money is spared to render it all that a town reputed to be a health resort and a great centre of education should be. The drains and sewers receive constant attention.

The diversion of the storm water from the sewers into the Chelt is a matter of the utmost importance to the efficiency of the sewerage system, but the action of riparian owners below the town, supported by the Local Government Board, has thrown obstacles in the way of the Corporation in dealing satisfactorily with this matter.

Overcrowding was dealt with in 26 cases. The inspection of houses by a skilled official of the Health Department and the grant of certificates by the Corporation is a valuable aid in the improvement of house property, and a protection to tenants. The number of certificates granted during the year

was 77. The model Bye-laws of the Local Government Board for houses let in lodgings have just been adopted. Dairies, cowsheds, and milkshops are regularly inspected. By a Provisional Order, obtained last year, dairymen supplying milk from premises within or beyond the Borough are compelled to notify to the Medical Officer of Health all cases of infectious disease amongst persons connected with their dairies. All milk-sellers are obliged to furnish lists of their customers when the outbreak of any infectious disease appears attributable to their milk. Increased powers have been obtained dealing with registered slaughter-houses.

Water supply.--In consequence of long continued drought during a succession of years, it was decided to increase the Works at Tewkesbury, and now the Town supply is supplemented by that from Tewkesbury, of excellent quality and unlimited amount.

The Delancey Fever Hospital continues amply to provide for the necessities of the Town and District. In addition to this the Cheltenham College has its own separate wards adjoining the Delancey, with 16 beds, and the Ladies' College has its own infectious sanatorium on another site. It is evidence of the success of the Institution and its staff in dealing with infectious disease that although no less than 263 cases have been under treatment in the Hospital, comprising Scarlet Fever, Small-pox (23 cases), Enteric, and Diphtheria, no death has occurred in the Hospital since 1894.

The steps taken by the Corporation to cope with the danger of the introduction of Small-pox from



Gloucester have already been reported to the Council. No less than 9,239 persons were vaccinated or re-vaccinated by the 24 medical men who undertook the duty, and so a great danger was averted. It is unsatisfactory to find that the Vaccination Acts have since been allowed to lapse, and consequently a generation is springing up entirely unprotected.

Dr. Garrett very strongly recommended the inclusion of measles amongst the notifiable diseases as a wise measure in a town of schools like Cheltenham, but the Health Committee failed to obtain the sanction of the Council to its adoption. During the winter of 1895-6 fully 1,400 cases of Measles occurred in families of all conditions of life. 49 deaths resulted, all in the houses of the humbler classes.

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M.O.H.—DR. CRESSWELL.

CHEL TENHAM.  
RURAL.

Isolation Hospital—Small-pox and General Diseases.

No case of Small-pox occurred. Cancer still forms a very prominent cause of death; 6 deaths, or 3·92 per 1,000 of the population. A good deal of Scarlatina occurred in the hill districts. Dr. Cresswell advises that no payment should be demanded from any patient treated in the public wards of the Isolation Hospital. At the same time penalties should be enforced in cases of concealment of infectious disease. The District Council have adopted his view. The water supply in Prestbury is deficient, and derived from shallow wells, although the Cheltenham Corporation mains have now been brought to near the centre of the village. No cases of infectious disease have been notified in any of the Parishes in proximity to the Sewage Farms.



CHARLTON KINGS  
URBAN.

M.O.H.—DR. TODD.

Isolation Hospital—Small-pox and General Diseases.

A thorough system of vaccination was instituted, and the people gladly availed themselves of it. Prompt isolation in the Delancey Hospital of 28 cases of Scarlet Fever prevented an epidemic. A parent was prosecuted and convicted for failure to notify a case which occurred in his house. The Council have decided to punish parents and others who neglect to comply with the Act.

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GLOUCESTER.  
RURAL.

M.O.H.—DR. BOND.

Isolation Hospital—None.

The low figure of the birth-rate is remarkable. This may be accounted for by the fact that more than a tenth of the population is composed of the Asylums, the Gaol, and St. Lucy's Home.

The epidemic of Small-pox in the City extended to the Rural District. 81 cases were notified. 64 were in the suburbs of the City, 12 were in the country parishes, 4 in the Wotton Asylum, and 1 in the Gaol. 36 of the 64 suburban cases occurred on the West side of the Small-pox Hospital and within half a mile of it. The intimate connection and common interests which exist between the city and the Rural District in regard to infectious diseases should lead them to combine for the purpose of providing a proper joint Isolation Hospital, or one district may be a source of danger to the other. 4 cases only occurred in the Asylum. Dr. Craddock :—" Situated in a district where Small-pox was absolutely raging. The air was full of it, and, as every one knows, the

City was like a city of the dead and was shunned like a plague spot. Here is a large institution packed to its utmost capacity with persons, many of low and enfeebled vital powers. It is attacked by the most certainly infectious malady known to medical science, where it might be expected to spread like a spark amongst tinder. Result: 4 persons took the disorder, nearly 800 did not. Why? Because they were vaccinated."

Of the 76 cases which occurred in the Rural District proper, 6 were admitted into the City Hospital. The remainder were hospitalised in the houses in which they occurred. The Council undertook to provide food and medical attendance for the sick as well as for all the members of the infected families who were quarantined.

A sum of about £10,000 is, under Government sanction, being laid out on a sewerage scheme for the parishes of Barnwood and Wotton Without, and a special drainage district has been constituted.

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M.O.H.—Dr. JOYNES.

DURSLEY.  
RURAL.

Isolation Hospital—None.

Steps have been taken to improve the water supply to Dursley at a cost of £211. The sewerage system is defective, and discharges into the Cam stream. One sewer into the Broadwell stream which passes through a mill. Wotton-under-Edge sewage system is by privy vaults, very unhealthy, and productive of bad throats. The Medical Officer of Health advises the adoption of dry earth closets.

The bake-houses and slaughter-houses have all been inspected and found satisfactory. The Notifi-

cation Act is not in force. 1 case of Small-pox occurred. It was isolated in a vacant house called The Moors—cost to the District £115. The need of an Isolation Hospital for two infectious diseases, and means of disinfection, is much felt.

THORNBURY.  
RURAL.

M.O.H.—Dr. BOND.

Isolation Hospital—Small-pox ; for General Diseases  
—None.

The birth-rate is lower than usual; the death-rate higher, due to the prevalence of Measles, Whooping Cough, and Diphtheria. 53 cases of the latter were notified, no less than 30 in the Parish of Almondsbury. On inspection of the children's throats at school, 12 of them were found to be in a distinctly suspicious condition. In September the schools were closed, with the result that not a single case was notified in October, and only 1 each in November and December. Dr. Leonard successfully treated the greater number of these cases with antitoxin. The Sanitary Authority decided to secure two farm-houses, one at either end of the district, for the reception of Small-pox. 7 cases occurred in Berkeley. The series of cases illustrated in a conclusive way the fact that though Vaccination is not an absolute protection, yet when Small-pox does happen to attack vaccinated children it is seldom attended with danger. Thus, exactly 100 years almost to a day, after Jenner had demonstrated in the Town of Berkeley the protective value of Vaccination, was wisdom justified of one of her most distinguished children by an outbreak which confirmed, as clearly as it was well possible



to do, the importance of the fact which Jenner then established. The District Council seem fully alive to the importance of the Sanitary work they have in hand, and are most assiduous and conscientious in the discharge of their duties.

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CHIPPING SODBURY.  
RURAL.

M.O.H.—Dr. BOND.

Isolation Hospital—Small-pox ; for General Diseases  
—None.

In order to isolate any cases of Small-pox, the Council acquired the lease of two cottages on Sodbury Common. They were repaired and reconstructed at a cost of £130, but were not ready in time to receive the single case which occurred.

Works connected with the Wickwar Drainage Scheme have been commenced. The water supplies have received careful attention.

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WARMLEY.  
RURAL.

M.O.H.—Dr. W. MURRAY.

Isolation Hospital—Small-pox ; for General Diseases  
—None.

Progress has been made in the Mangotsfield Sewerage Scheme. The loan has been sanctioned, and everything has been pressed forward, so that this necessary work is now begun. The completion of the Scheme is urgently needed. Good work has been done as regards scavenging. The refuse heaps mentioned in the last annual report as allowed to accumulate round dwellings close to the highway, and in close proximity to the wells, have been removed, and are not allowed to accumulate again. If the Mangotsfield Sewage Scheme is completed,



the most populous portion of the district will be put in the way of having all sewage defects remedied.

A considerable amount of Scarlet Fever was prevalent in the rural districts. The closing of the schools was followed by a subsidence; but in the urban districts the subsidence was not marked during the holidays. Of 1,283 children born, only 532 were vaccinated. An Isolation Hospital is needed for the treatment of general infectious diseases, retaining the Keynsham Hospital for Small-pox only.

ST. GEORGE'S.  
URBAN.

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M.O.H.—DR. J. YOUNG.  
Isolation Hospital—None.

The Zymotic death-rate was 2. This is unsatisfactory, but the increase is mainly due to the great fatality from Measles, Whooping Cough, and Diarrhœa. 2 cases of Small-pox only occurred. No Hospital exists. Defective drains produced 19 cases of Typhoid Fever. Infantile Diarrhœa produced 41 deaths; Measles, 42. The vapours from the Chemical Works in Crew's Hole District were not found to have had any unfavourable effect upon its health, for the death-rate of St. George's is 14·4, and that of Crew's Hole is only 9·2. Of 408 total notifications only 22 were from this place.

STAPLETON.  
URBAN.

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M.O.H.—DR. W. BROWN.  
Isolation Hospital—Small-pox; for General Diseases—  
None.

7 cases of Small-pox, 80 mild cases of Scarlet Fever.

HORFIELD.  
URBAN.

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M.O.H.—DR. J. H. PARRY.  
Isolation Hospital—None.

The general health of the District is very satisfactory. Scarlatina has been prevalent; 120 cases, but of a mild character.

KINGSWOOD.  
URBAN.

M.O.H.—DR. C. J. PERRETT.

Isolation Hospital—None.

Scarlet Fever, Influenza, Bronchitis, Pneumonia, and Pleurisy prevailed. 40 deaths from these causes, 19 of which were of children under 5 years of age. The water supply of the District is ample and good. The Lomax and Lomax Scheme for the drainage of the District and discharge into the River has been approved. The factories have all been inspected, and found in a satisfactory state and well ventilated.

BARTON REGIS.  
RURAL.

M.O.H.—DR. E. CROSSMAN.

Isolation Hospital—None.

Westbury-on-Trym is still struggling with a new scheme of sewerage. The Local Government Board held an enquiry, and reported: "The Board will not sanction the abandonment of the existing Sewage Disposal Works at Camford, but requires that they shall be so modified and improved as to render them capable of properly purifying the sewage without causing any local nuisance." Dr. Crossman reported as to the inadvisability of this course, from the situation of the Camford Sewage Farm in the centre of a rapidly growing neighbourhood, and the unsuitability of the soil; and suggested that the sewage should be conveyed to Sea Mills at the junction of the Trym and Avon, and discharged there. Another Local Government Board enquiry was held into this, but at the date of this Report no decision had been arrived at.

Negotiations for erecting an Isolation Hospital at Patchway have fallen through. The Medical Officer of Health strongly recommends the compulsory notification of Measles. Of 286 children born, only 142 were vaccinated.



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